

# The Rosemary Weigel FROSTBITE 5K



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[www.wcchallenge.org](http://www.wcchallenge.org)



Scan for more  
Frostbite Information.

Saturday, December 5, 2015

Richmond Indiana

*Event proceeds go to Park Department summer programming in honor of longtime park employee Rosemary Weigel, who passed in February 2012.*

## Schedule:

- 3:45 pm Packet Pick Up (Don's Cabin)  
Register Day of Race (Mac Shack)
- 4:45 pm Registration CLOSED
- 5:00 pm Race Start on west side of lake
- ? :?? pm Awards at Shelter #2  
Stay for *Celebration of Lights!*

## Frostbite Items:

Pre-registered items, door prizes, and awards are surrendered to the Parks Department 2 weeks after the race. Items will be available for pick up day of race or at the Parks Office. Office hours are 8 am - 5 pm, Monday - Friday (except holidays). Call 983-7426 with questions or concerns.

## Entry:

\$20 pre-registration (postmarked Nov. 25) / \$25 day of race

Checks Payable to: *City of Richmond*

Drop off completed entry forms to the Park Office, located at 2200 East Main Street, Richmond, or mail to:

Parks Department  
Attn: Frostbite 5K  
50 North 5th Street  
Richmond, IN 47374

\*Check out our  
**CHILD DISCOUNT**

## All Weather Event:

The Frostbite 5K is an all-weather event. We race in freezing rain, sleet, snow, or sun. There is little chance the event will change or be postponed/cancelled. In extenuating circumstances, we will reconsider and announce changes though emails to runners (via emails provided on registration forms), Facebook/Twitter, and G101.3.

## Frostbite Information:

For more information about the Frostbite 5K, including the route this year or places to park, please scan the QR code to the left, or visit [facebook.com/richmondparks](https://facebook.com/richmondparks).

## NOTICE UNDER THE AMERICAN WITH DISABILITIES ACT

In accordance with the requirements of Title II of the Americans with Disabilities Act of 1990 (ADA), the City of Richmond, Indiana, will not discriminate against qualified individuals with disabilities on the basis of disability in its services, programs, or activities.

**Employment:** The City of Richmond, Indiana does not discriminate on the basis of disability in its hiring or employment practices and complies with all regulations promulgated by the U.S. Equal Employment Opportunity Commission under Title I of the ADA.

**Effective Communication:** The City of Richmond will generally, upon request, provide appropriate aids and services leading to effective communication for qualified persons with disabilities so they can participate equally in the City of Richmond programs, services, and activities, including qualified sign language interpreters, documents in Braille, and other ways of making information and communication accessible to people who have speech, hearing or vision impairments.

**Modifications to Policies and Procedures:** The City of Richmond will make all reasonable modifications to policies and programs to ensure that people with disabilities have an equal opportunity to enjoy all of its programs, services, and activities. For example, individuals with service animals are welcome in the City of Richmond offices, even where pets are generally prohibited.

Anyone who requires an auxiliary aid or service for effective communication, or a modification of policies or procedures to participate in a program, service, or activity of the City of Richmond, should contact the office of D. Sue Roberson, ADA Coordinator, by telephone (765-983-7244) or email ([sroberson@richmondindiana.gov](mailto:sroberson@richmondindiana.gov)) as soon as possible but no later than 48 hours before the scheduled event.

The ADA does not require the City of Richmond, Indiana, to take any action that would fundamentally alter the nature of its programs or services, or impose an undue financial or administrative burden.

Complaints that a program, service or activity of the City of Richmond, Indiana, is not accessible to persons with disabilities should be directed to D. Sue Roberson, ADA Coordinator, 50 North 5th Street, Richmond, IN 47374, telephone 765-983-7244, or email [sroberson@richmondindiana.gov](mailto:sroberson@richmondindiana.gov).

The City of Richmond, Indiana, will not place a surcharge on a particular individual with a disability or any group of individuals with disabilities to cover the cost of providing auxiliary aids/services or reasonable modifications of policy, such as retrieving items from locations that are open to the public but are accessible to persons who use wheelchairs.

City of Richmond, Indiana  
Grievance Procedure Under The American with Disabilities Act

This Grievance Procedure is established for the City of Richmond, Indiana, to meet the requirements of the Americans with Disabilities Act of 1990 ("ADA"). It may be used by anyone who wishes to file a complaint alleging discrimination on the basis of disability in the provision of services, activities, programs, or benefits by the City of Richmond, Indiana. The City's Personnel Policy governs employment-related complaints of disability discrimination.

The complaint should be in writing and contain information about the alleged discrimination such as name, address, phone number of complainant and location, date and description of the problem. Alternative means of filing complaints, such as personal interviews or a tape recording of the complaint will be made available for persons with disabilities upon request.

The complaint should be submitted by the grievant and/or his/her designee as soon as possible but no later than 60 calendar days after the alleged violation to:

D. Sue Roberson  
ADA Coordination/Director of Human Resources  
City of Richmond, Indiana  
50 North Fifth Street  
Richmond, IN 47374

Within 15 calendar days after receipt of the complaint, D. Sue Roberson as ADA Coordinator, or her designee, will meet with complainant to discuss the complaint and the possible resolutions. Within 15 calendar days of the meeting, D. Sue Roberson as ADA Coordinator, or her designee, will respond in writing, and where appropriate, in a format accessible to the complainant, such as large print, Braille, or audio tape. The response will explain the position of the City of Richmond, Indiana, and offer options for substantive resolution of the complaint.

# The Rosemary Weigel FROSTBITE 5K

Saturday, December 5, 2015 - Richmond Indiana

*Proceeds go to Park Department summer programming in honor of longtime  
park employee Rosemary Weigel, who passed in February 2012.*



*A beautiful run/walk through the  
luminaries in Glen Miller Park,  
with holiday music, hot chocolate,  
and the spirit of the season!*

## OFFICIAL ENTRY FORM - MUST SIGN WAIVER BELOW

(This form may be reproduced if additional copies are needed) One form per person

_____ Name			M _____ F _____ Gender (please check)
_____ Address			____ / ____ / ____ Date of Birth (MM/DD/YYYY) (If under 12, see box to the right)
_____ City	_____ State	_____ Zip	
_____ Phone		_____ Email Address	

### CHILD DISCOUNT

☐ I am under 12 and  
would like to have the child  
discount of \$5. (Discount means  
grab bags will be slightly different  
than if paid for as an adult.)

### Fee for 12 and under:

\$15 Postmarked by Nov 25

\$20 Day of Race

Sponsored by J.M. Hutton & Co., INC

**J.M. HUTTON & CO., INC.**  
Manufacturers of "Quality" Metal Stampings, Metal, and Hardwood Caskets

\_\_\_\_\_  
Emergency Contact Name                      Emergency Contact Phone

Pre-registration price ends Wednesday, November 25 (or mail must be postmarked by Nov. 25)

Make all checks payable to "City of Richmond"

Return to: Parks Department, Attn: Frostbite 5K, 50 N. 5th Street, Richmond, IN 47374

## WAIVER AND RELEASE

### THE UNDERSIGNED HEREBY AGREES THAT:

In consideration for the opportunity for \_\_\_\_\_ (myself, or my child or ward), participating in the  
(Name or Child's Name)

Richmond Parks Department "Frostbite 5K run/walk" (hereinafter the "event"), the undersigned hereby forever releases and saves harmless the City of Richmond, Indiana, and/or the City of Richmond Parks Department, and all and each of its agents, Board members, employees and representatives, as well as any organizers or sponsors, both jointly and severally (hereinafter "Releasees"), from any and all liability, claims, and any and all damages, which may be incurred, including personal injuries sustained or death, as a result of myself or my child or ward participating in the event. Such release shall include, but not be limited to, any claims which may arise because of a negligent act or omission by the City of Richmond, the Richmond Parks Department, or any of their agents, employees or representatives, either jointly or severally; and for any claims, expenses, and damages which might hereafter be brought, claimed, or instituted for any reason whatsoever. I also understand, acknowledge, and agree that my image or name, or the image or name of my child or ward, may be subsequently used for publicity and/or promotional purposes including but not limited to photographs or videos of participation and said use of any image, name, photograph, or video by Releasees is expressly authorized by the undersigned. I also understand, acknowledge and agree that I have read the entry form and all information contained within said form and my signature below constitutes agreement with the form and all information contained therein. I also understand, acknowledge and agree that any entry fees, once paid, are non-refundable.

This agreement shall be binding on all parties to this agreement as well as their heirs, successors, personal representatives and assigns from and after execution hereof. The City of Richmond or the Richmond Parks Department has the right to rescind permission of the above activities at any time.

\_\_\_\_\_  
Signature (Parent/Guardian if under 18)

\_\_\_\_\_  
Date